FORM D

OCT 0 \$ 2004

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average burden							
hours per respo	hours per response 16.00						

SEC USE ONLY								
Prefix	Serial							
DATE RECEIVED								
	1							

Name of Offering (☐ check if this Common Stock	is an amendment and na	me has changed,	and indicate cha	ange.)		
Filing Under (check box(es) that ap Type of Filing: New Filing	oply): ☐ Rule 504 ☐ Amendment	□ Rule 505	⊠ Rule 506	☐ Section 4	(b) 🗆 UI	LOE
Type of Fining.	Amendment				- 1881 1181 1118 1118	
	A. I	BASIC IDENTI	FICATION DA	TA	_	
1. Enter the information requeste	d about the issuer				_	
Name of Issuer (check if this is a	an amendment and name	has changed, ar	nd indicate chang	ge.)	04	4044869
EdgeFocus, Inc.						
Address of Executive Office	(Number and Stre	eet, City, State, Z	Lip Code) Te	elephone Numb	per (Including Area Code)
17981 Sky Park Circle, Suite A, I					49) 417-3360	
Address of Principal Business Oper		Number and Stre	eet, City, State, Z	(ip Code) Te	lephone Numb	per (Including Area Code)
(if different from Executive Officer						
17981 Sky Park Circle, Suite A, I	rvine, CA 92614			(9	49) 417-3360	
Brief Description of Business						PENCESSED OCT 12 2006
Technology						ACT 12 2001
Type of Business Organization						
☑ corporation☐ business trust	☐ limited partners!			other (please	e specify):	Thomson $\check{\mathcal{E}}$ Financial
Actual or Estimated Date of Incorp Jurisdiction of Incorporation or Org	ganization: (Ente	r two-letter U.S.	[7] [0][0 Postal Service all or other foreign j	breviation for		<u> </u>
GENERAL INSTRUCTION						
Federal: Who Must File: All issuers making ar 77d(6).	offering of securities in r	eliance on an exer	mption under Regu	ilation D or Sect	ion 4(6), 17 CF	R 230.501 et seq. or 15 U.S.C.
When to File: A notice must be filed Exchange Commission (SEC) on the eadue, on the date it was mailed by United	arlier of the date it is receive	ed by the SEC at	the address given			
Where to File: U.S. Securities and Excl	nange Commission, 450 Fi	fth Street, N.W., W	ashington, D.C. 20)549.		
Copies Required: Five (5) copies of photocopies of the manually signed cop			of which must b	e manually signo	ed. Any copies	not manually signed must be
Information Required: A new filing mu information requested in Part C, and an the SEC.						
Filing Fee: There is no federal filing fe	e.					
State: This notice shall be used to indicate rel that have adopted this form. Issuers re made. If a state requires the payment of the filed in the appropriate states in according to the states in according to the states.	lying on ULOE must file are as a precondition to	a separate notice verthe claim for the e	with the Securities exemption, a fee in	Administrator in the proper amou	each state wher nt shall accompa	re sales are to be, or have been any this form. This notice shall
		ATTEN	TION -			
Failure to file notice in the apapropriate federal notice w		not result in a	a loss of the fe			

SEC 1972 (6-02)

the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 8

2088/021647-0001 418605.01



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or
Fyke, Richard (1)	·				
Name (Last name first, if in	dividual)				
7981 Sky Park Circle, Suit					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code).			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Fyke, John (1)					
Name (Last name first, if inc	dividual)				
7981 Sky Park Circle, Suit					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Russell, Michael					
Name (Last name first, if inc	•				
7981 Sky Park Circle, Suit					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Hitch, Peter					
Name (Last name first, if inc	*				
7981 Sky Park Circle, Suit					
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Easley, Ryan					
Name (Last name first, if inc	•				
17981 Sky Park Circle, Sui	te A, Irvine, CA 92	2614			-
Business or Residence Addr	ess (Number and St	reet, City, State, Zip Code)	,		
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Stokes, Whitney	12-2415	·			
Name (Last name first, if inc					
7981 Sky Park Circle, Suite					
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Somers, Jim					
Name (Last name first, if inc	*				
7981 Sky Park Circle, Suite					
Business or Residence Addre	ess (Number and St	reet, City, State, Zip Code)			
	(Use blank sl	heet, or copy and use addition	al copies of this sheet, as ne	ccessary.)	

<u>Footnote 1</u>: Collectively, Richard and John Fyke have the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.

1.	Has the issu	ier sold, oi	does the											Yes	
				Answe	er also in	Appendi	x, Colum	ın 2, if fil	ing under	ULOE.					
2.	What is the	minimum	investmer	nt that will	be accept	ted from a	ny individ	ual?			••••••	•••••••		\$	N/A
3.	Does the off														No
4.	Enter the in	• •	-	-	•										
	similar remu associated p dealer. If mo for that brok	uneration to berson or a ore than fi	for solicitations for solicitation for soliciting f	ition of pu broker or	rchasers in dealer reg	n connecti istered wit	on with sa th the SEC	iles of seci and/or w	urities in the	ne offering or states,	g. If a pers list the na	on to be li me of the	sted is an broker or	i •	
Ful	Name (Last	name first	, if individ	iual)											
Bus	iness or Resid	dence Ado	lress (Nun	nber and S	treet, City	, State, Zi	p Code)								
Nar	ne of Associa	ted Broke	r or Deale	r											
Stat	es in Which I	Person Lis	ted Has Se	olicited or	Intends to	Solicit P	urchasers	<u> </u>						<u>.</u>	
	(Check "All	States" or	r check inc	dividual Si	ates)						•••••	•••••••••	••••••	□ All S	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	Name (Last	name first	, if individ	lual)											
Bus	iness or Resid	dence Add	lress (Num	ber and S	treet, City	, State, Zi	p Code							•	
Nan	ne of Associa	ted Broke	r or Deale	г											
Stat	es in Which F														-
	(Check "All	States" or	check inc	lividual St	ates)							•••••		□ All S	States
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[СА] [КҮ] [NJ] [ТХ]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full	Name (Last 1	name first,	, if individ	ual)											
Bus	iness or Resid	lence Add	ress (Num	iber and Si	reet, City	, State, Zip	Code								
Nan	ne of Associat	ted Broker	or Dealer												
State	es in Which P														States
	•				_									— Ан 3	iaics
	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Type of Security Offering Price Already Sold Debt Equity 700,000 536,000 □ Common ☐ Preferred Convertible Securities (including warrants)..... Partnership Interests Other (Specify _____)..... Total..... 700,000 536,000 Answer also in Appendix, Column 3, if the filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of person who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Investors of Purchases Accredited Investors 17 536,000 Non-accredited Investors Total (for filings under Rule 504 only) If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Type of Dollar Amount Type of offering Security Sold Rule 505 Regulation A..... Rule 504 Total

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees.	\boxtimes	\$5,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately)		\$
Other Expenses (identify)		\$
Total	\boxtimes	\$5,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E O	F PRO	CEEDS		
b. Enter the difference between the aggregate offering price given in response to Part C — Question total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted proceeds to the issuer."	d gr	oss			\$ <u>695,000</u>
Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check to the left of the estimate. The total of the payments listed must equal the adjusted gross proceed issuer set forth in response to Part C — Question 4.b above.	the t	ox			
		Of Dire	nents to ficers ctors & fliates		Payments to Others
Salaries and fees		\$	<u> </u>	□ \$_	· · · · · · · · · · · · · · · · · · ·
Purchase of real estate		\$		□ \$ _	
Purchase, rental or leasing and installation of machinery and equipment		\$	[□ \$ _	
Construction or leasing of plant buildings and facilities		\$		□ \$ _	· · · · · · · · · · · · · · · · · · ·
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		\$	(□ \$ _	
Repayment of indebtedness		\$	[⊐ \$ _	
Working capital		\$	[⊠ \$_	695,000
Other (specify):					
	П	s	[¬ s	
Column Totals				_	
Total Payments Listed (column totals added)		Ψ		_ ↓_ §	
					075,000
D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this ignature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Common formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 5 source (Print or Type) Signature	notic nissi 02.	e is file			
EdgeFocus, Inc.)ct	ber	7, 2004	•	
lame of Signer (Print or Type) Tiple of Signer (Print or Type)					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE

. Is any party described in 17 CFR 230.262(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

Yes No
□ ⊠

See Appendix, Column 5, for state response

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Type)
------------------------	-------

Type) /Signature

Date

October 7. 2004

Name of Signer (Print or Type)

Jeffrey Hultman

EdgeFocus, Inc.

Chief Executive Officer

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3			4		Disqual	5 ification
	to non-a	d to sell accredited es in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	·	under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors		Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		X	Common Stock \$536,000	17	\$536,000	0	0		X
CO									
CT		<u> </u>		· · · · · · · · · · · · · · · · · · ·					ļ
DE							· · · · · · · · · · · · · · · · · · ·		ļ
DC				· · · · · · · · · · · · · · · · · · ·				 -	
FL								 	
GA								-	
HI									
ID				-					
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LA		_							<u> </u>
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NM NV			•					 	
NY NC									
ND ND									
OH					···			 	
OK									
2088/02164				7 of				<u> </u>	<u></u>

1	Intendation non-a	I to sell accredited is in State	Type of security and aggregate offering price offered in state		Type of investor and amount purchased in State (Part C-Item 2) Number of Accredited Investors Amount Investors Amount				
State	(Part B	No	(Part C-Item 1)	Accredited					
OR								Yes	No
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA					_				
WA									
WV				,					
WI									
WY									
PR									